## **Communications Report 2020 Alan Taman**

This year has of course seen unprecedented events, and unique demands and opportunities for the group. This has been reflected in communications activity and planning.

Members in the nations of Scotland, Wales and Northern Ireland were all contacted individually in the months prior to the pandemic, and asked for their views on what DFNHS meant for them. Only a few replies were received, but these indicated that members were generally satisfied with the work DFNHS was doing to protect the NHS from privatisation and under-funding. Members were then also contacted by specialty and asked the same questions, which again indicated that members were satisfied with the work DFNHS was doing.

Once the pandemic began and national lockdown was declared, it soon became apparent that a great deal of work needed to be done in unique circumstances, and that this was changing rapidly and unpredictably. Time was devoted to framing the best strategic response, carefully avoiding any 'knee-jerk' responses which could have proven counterproductive or harmful to DFNHS's reputation. The government's campaign to make the NHS the central focus of public action was weighed up very carefully and other campaigning groups were contacted to determine their views. The consensus (shared by AT and also by EC) was that the drive to 'protect the NHS' was a short-term tactic aimed at preventing the service from being overwhelmed by Covid-19 cases. It did not reflect a change in government ideology towards the NHS, nor its long-term strategy of continued under-funding and privatisation. It was decided not to challenge the government's stance during this phase of the pandemic, as this was a unique situation of great difficulty and doing so could easily cast DFNHS in a bad light, as 'unpatriotic'. However, public comments were made early on about the woefully inadequate PPE provision, which attracted national media attention. Other groups, such as the BMA and Doctors' Association UK, commented from a more 'font-line' perspective.

As the testing and tracing 'Lighthouse Lab' system was set up, it was clear very early on that this was being done in a privatised, 'business model' by large corporations with little to no expertise in public health. It also became clear that local authority expertise was being largely marginalised by this 'call-centre model' approach, which relied largely on volunteers who had little or no knowledge of the communities in which the people they were contacting lived in. This was therefore privatisation largely for the sake of it, which was shown not to be working, and which ignored the wealth of expertise in public health available via LAs. DFNHS has commented publicly on this several times, and again national press has taken an interest. We have also worked with other groups (We Own It, Keep Our NHS Public, Health Campaigns Together) to try to make the public aware of these shortcomings.

DFNHS also commented on the way private hospital facilities were being used in the pandemic, with details of funding remaining obscure and the relationship between the NHS and the private organisations remaining unclear.

A very alarming picture is now emerging, with regard to the ongoing way test &trace is being funded and developed, private facilities engaged, and existing NHS services either put on hold or withdrawn using the pandemic as a blanket explanation with little to no accountability. NHS trusts have been told they must meet 90% of their pre-Covid elective targets in October or face financial censure, for example. A coherent, clear and present danger to the NHS is becoming apparent, under the guise of the continuing pandemic. This is deliberate and systematic, and is driven by ideology that is hostile to NHS principles of universal, free healthcare. DFNHS will continue to oppose this and make public what is happening, and continue to work with other groups to do so.

The Essay Competition drew very good responses this year, following the leafleting of every Postgraduate Research Centre in major trusts in the UK.

Procedurally, our social media streams continue to grow in popularity - we recently exceeded 2,000 followers on Twitter for the first time. This will continue to be developed. National media continue to regard us as reliable, and contact us for advice as well as for comment.

New members are now contacted by AT to ask if they would consider representing DFNHS on social media, or contribute blogs to the website.

The next 12 months remain unpredictable. However, the focus will continue to be on developing social media, commenting where appropriate, liaising with other campaigning groups for concerted action against the looming threat to the NHS, and reaching trainees to encourage them to join.

AT September 2020